PATENT APPLICATION FEE DETERMINATION RECO								1'	Abhresion	oru	ÖCKEL MAU	nber	
Effective January 1, 2003								10600 411					
CLAIMS AS FILED - PART I									NTITY	-	07455	-	
(Column 1) (Column 2)							TYPE			OR		THAN .	
T	OTAL CLAIMS	•	34					RATE		7	RATE	FEE	
FOR			NUMBER	FILED	NUME	BER EXTRA	-	C FEI	FEE 375.00	OR	BASIC FEE		
TOTAL CHARGEABLE CLAIMS			3/1 mi	nus 20=	•].	14		X\$ 9=		OR	X\$18=	20	
IN	DEPENDENT C	LAIMS	aminus 3 = C			′	X42=		1	1	Y04	000	
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT				A-76-5		├	OR	X84=		
* If the difference in column 1 is less than zero, enter "0" in column 2						+140=		OR	+280=				
							TO'	TAL	L	OR	TOTAL	1002	
CLAIMS AS AMENDED - PART II 4-8-05 (Column 1) (Column 2) (Column 3)							SM	ALL	ENTITY	OR	OTHER SMALL		
٩		CLAIMS REMAINING		HIGH	EST				ADDI-	1		ADDI-	
Ę		AFTER		PREVIO	USLY	PRESENT	RATE		TIONAL		RATE	TIONAL	
AMENDMENT A		AMENDMENT	1	PAID	OR		<u> </u>		FEE			FEE	
	Total Independent	34	Minus	-3	4_	-	X\$	9=		OR	X\$18 <u>.</u> =		
		AUTATION OF ME			<u> </u>	-	X4:	2=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								O=			+280=		
								TAL		OR	TOTAL		
(Column 1) (Column 2) (Column 3)							ADDIT.			OR,	ADDIT, FEE		
		(Calumn 1)	(Column 3)										
AMENDMENT B		REMAINING		HIGHE		PRESENT			ADDI-	1 1		ADDI-	
		AFTER AMENOMENT		PREVIO		EXTRA	RATE		TIONAL		RATE	TIONAL	
	Total .	. 24	Minus ·		67		-		FEE			FEE	
	Independent	. 3	Minus	***	-/		X\$)=		OR	X\$18=		
₹	FIRST PRESE	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					X42	=		OR	X84=	I	
Paid For A Extra Independ Claim, Not Needed Amel 10-3-05)=		OR	+280=		
	(Column 1) (Column 2) (Column 3)							TAL		OR ,	TOTAL		
								FEE		- ,	ODIT. FEE		
		CLAIMS		HIGHE		(COMMIN S)							
5		REMAINING AFTER		NUMB PREVIO		PRESENT EXTRA	DAT		ADDI- TIONAL	- 1	BATE	ADDI-	
		AMENDMENT		PAID F		20,100			FEE		RATE	TIONAL FEE	
AMENDMENT	Total	*	Minus	and:		e	X\$ 9	=		OR	X\$18=		
3	Independent	•	Minus	***		±	X42			1	YOA		
	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						^**Z	_		OR	X84=		
+140= OR +280=											. [
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter 20. OR TOTAL													
	TOP PURINESS NOT	mber Previously Pa	M For IN THE	S SPACE IN	less than	3 enter 3	ADDIT, I			P	DDIT. FEE		
	···· reginest reim	ber Previously Paid	· Low (location	maspender	nj is the	nighest number (ound in th	e stoto	ropriate box	in cot	mn 1.	I	